## PUBLIC VOUCHER FOR PURCHASES AND
## SERVICES OTHER THAN PERSONAL

Bu. Vou. No. _____

**Page 1 of 1**

*U. S.* _____

(Department, bureau, or establishment)

PAID BY

*Voucher prepared at* _____

(Give place and date)

**THE UNITED STATES, Dr.,**

*Payee's Account No.* _____

*To* _____

**General Precision Labortary**

(Payee)

**Pleasantville, N. Y.**

| (Address) | (City) | (State) |

| No. and Date of Order | Date of Delivery or Service | ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) | QUANTITY | UNIT PRICE | | AMOUNT | |
|---|---|---|---|---|---|---|---|
| | | Discount Terms      Invoice No. | | Cost | Per | Dollars | Cts. |
| | | 25362 | | | | $    53 | 63 |
| | | 25363 | | | | 107 | 26 |
| | | 25364 | | | | 53 | 63 |
| | | 25403 | | | | 214 | 52 |
| | | 25404 | | | | 36 | 27 |
| | | 25419 | | | | 35 | 21 |
| | | 25423 | | | | 100 | 08 |
| | | 25420 | | | | 35 | 21 |
| | | 25424 | | | | 4 | 26 |
| | | 25425 | | | | 62 | 46 |
| | | Use continuation sheet(s) if necessary | | | | Cont. | |

PAYMENT:

Complete ☐

Partial ☐

Final ☐

Shipped from _____ to _____   Weight   Government B/L No.   | Total |

Standard Form
Form prescribed by
Comptroller General, U. S.
September 7, 1950
(Gen. Reg. No. 51, Supp. No. 11)
(Amended February 20, 1952)

**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

Bu. Vou. No. _____

*U. S.* _____
(Department, bureau, or establishment)

*Voucher prepared at* _____
(Give place and date)

**THE UNITED STATES, Dr.,**      *Payee's Account No.* _____

*To* _____
(Payee)

_____
(Address)              (City)              (State)

| No. and Date of Order | Date of Delivery or Service | ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) | QUANTITY | UNIT PRICE Cost | Per | Dollars | Cts. |
|---|---|---|---|---|---|---|---|
| | | Discount Terms    Invoice No.  Cont. | | | | | |
| | | 25426 | | | | $ 23 | 04 |
| | | 25427 | | | | 56 | 58 |
| | | 25428 | | | | 185 | 41 |
| | | 25432 | | | | 152 | 58 |
| | | 25433 | | | | 152 | 28 |
| | | 25437 | | | | 74 | 38 |
| | | 25438 | | | | 149 | 10 |
| | | 25439 | | | | 46 | 08 |
| | | 25440 | | | | 23 | 95 |
| | | 25441 | | | | 93 | 39 |
| | | Use continuation sheet(s) if necessary | | | | (Cont.) | |

PAYMENT: Complete ☐  Partial ☐  Final ☐

PAID BY

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total

Standard FORM NO. 1034—Revised
Form prescribed by
Comptroller General, U. S.
September 7, 1950
(Gen. Reg. No. 51, Supp. No. 11)
(Amended February 20, 1952)

## PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

D. O. V. No. _____

Bu. Vou. No. _____

U. S. _____
(Department, bureau, or establishment)

*Voucher prepared at* _____
(Give place and date)

THE UNITED STATES, Dr.,     *Payee's Account No.* _____

To _____
(Payee)

_____
(Address)          (City)          (State)

| PAID BY |
| --- |
| |

| No. and Date of Order | Date of Delivery or Service | ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) | QUANTITY | UNIT PRICE | | AMOUNT | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| | | Discount Terms     **Invoice No. (Cont.)** | | Cost | Per | Dollars | Cts. |
| | | 25442 | | | | $ 31 | 13 |
| | · | 25443 | | | | 70 | 29 |
| | | 25444 | | | | 62 | 26 |
| | | 25445 | | | | 31 | 13 |
| | | 3886 Cr. | | | | (65 | 21) |
| | | 3887 Cr. | | | | (130 | 42) |
| PAYMENT: | | 3889 Cr. | | | | ( | 08) |
| Complete ☐ | | 3890 Cr. | | | | (65 | 21) |
| Partial ☐ | | 3891 Cr. | | | | (260 | 84) |
| Final ☐ | | 3892 Cr. | | | | (1,239 | 28) |
| | | Use continuation sheet(s) if necessary | | | | (Cont.) | |

Shipped from _____ to _____ Weight _____ Government B/L No. _____ | Total |

Standard Form No. 1034—Revised
Form prescribed by
Comptroller General U. S.
September 8, 1934
(Gen. Reg. No. 51, Supp. No. 11)
(Amended February 20, 1952)

**PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL**

D. O. Vou. No. _____

Bu. Vou. No. _____

U. S. _____
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

THE UNITED STATES, Dr.,     Payee's Account No. _____

To _____

(Address)          (City)          (State)

| PAID BY |
|---------|
|         |

| No. and Date of Order | Date of Delivery or Service | ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) | QUANTITY | UNIT PRICE | | AMOUNT | |
|---|---|---|---|---|---|---|---|
| | | Discount Terms | | Cost | Per | Dollars | Cts. |
| | | Invoice No.(Cont.) | | | | $ ( | .61) |
| | | 3893 Cr. | | | | ( | .56) |
| | | 3894 Cr. | | | | (179. | 19) |
| | | 3895 Cr. | | | | ( 1. | 71) |
| | | 3896 Cr. | | | | (1,263. | 98) |
| | | 3899 Cr. | | | | (1,216. | 84) |
| | | 3900 Cr. | | | | ( 2. | 84) |
| | | 3901 Cr. | | | | | |

PAYMENT:
Complete ☐
Partial ☐
Final ☐

Use continuation sheet(s) if necessary **No Payment to be made for record only.**

| Shipped from | to | Weight | Government B/L No. | Total | —o— |

I certify that the above bill is correct and just and that payment has not been received.

**25X1A2g**

(Sign original only)

(Payee must NOT use this space)

Differences _____

Date _____     *Payee _____
(This certificate not required when a like certificate is made by payee on attached bill or bills)

Per _____     Title _____

Amount verified; correct for _____     ~ 3 **25X1A9a**

(Signature or initials) _____

| Contract No. | Date | Req. No. | Date | Invoice Rec'd. |

Pursuant to authority vested in me, I certify that this account is correct and proper for payment

**25X1A9a**

† Approved for $ _____

By _____

SIGN ORIGINAL ONLY

Title _____     15 Jan 60

(Contracting Officer)

Title _____     Date _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM     **25X1A9a**

**ACCOUNTING CLASSIFICATION** (Appropriation Symbol must be shown; other classification optional)

DOCUMENT NO. 5
NO CHANGE IN CLASS. ☐
☐ DECLASSIFIED
CLASS. CHANGED TO: TS (S) C
NEXT REVIEW DATE: _____
AUTH: HR 70-2
DATE: _____ REVIEWER: 010956

| Paid by | Check No. _____ dated _____, 19____, for $_____ | on Treasurer of the United States in favor of payee named above. |
| | Cash, $_____, on _____, 19____. Payee _____ | |
| | | (Sign original only) |

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for $_____", and over his official title.

Per _____

Title _____

16—22900-5